

HARRIS COUNTY DOMESTIC RELATIONS OFFICE

Month: _____ Attn: ____

Community Supervision Unit 1310 Prairie Street Suite 600, Houston, Texas 77002 Tel: (713) 274-7302 and Fax (713) 437-4732

PROBATIONER'S MONTHLY REPORT

Name:		Cause #			
Address: Street Check here if new address □	Apt. No	City	_ State Zip Co	de	
Telephone: Home	Cell/	Work:			
With whom are you living?		Relationship:			
Employer:Name of Company	Address:No., S	treet, City, Zip Code			
Occupation:	Employer's Phone	e Number:			
How long on this job? Supervise	or:	Month	ly earnings:		
What days of the week do you work? Please circ	ele: Mon., Tues., V	Ved., Thurs., Fri., Sat., and	d Sun		
What hours do you work? From	to _				
CHECK THE APPROPRIATE ANSWER			<u>Yes</u>	<u>No</u>	
Are you currently in Dad's Count or Building New Beginnings classes? (List below date started, expected start date or date finished)					
Are your child support payments being deducted by Wage Assignment?					
Does your child have health insurance? (If yes, from what source?)					
Have you been arrested since your last report? (If yes, explain below)					
Have you violated any other conditions of your probation since your last report? (If yes, explain)					
Do you own or drive a vehicle? Owner: Make/Model: Year: Color: License:				_	
Do you receive child support/welfare/food stamps or	any other source o	of income? (If yes, list amount	and sources)		
Are you currently participating in any programs (alcohol, community service, etc?) (If yes, explain)			0		
Do you have any problem you would like to discuss with your Community Supervision Officer?					
I acknowledge that the above information is	true and correc	t.			
X					
Probationer's Signature/Date		Community Supervision Officer			